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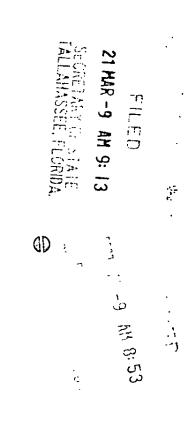
(Requestor's Name)
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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: YM LOCAL Remodeling LLC Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Yandy Mendez Martinez Name of Person	
Firm/Company	
1505 Blounstown St Address	
Tallahassee FL 32304 City/State and Zip Code Posice on by serve 123 A value of Som	FILED
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:	, •
Vandy Mende 2 at (350.) 339 - 6162 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
□\$125.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)	ied)
Mailing Address New Filing Section Street Address New Filing Section Division	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 45

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
VM 10000	Remodeling LLC
(Must contain the words "Limited Lin	ability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Yandy A	Me de	7
f		
1505 Blo	untstow	in St
Florida street address (P		
Tallahusee	FL	32304
City	State	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

MAR -9 AM 9: 10

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager M C R	1505 Mounstoun St Tallahasser, FL 32304
(I be attachment if necessary)	
(Use attachment if necessary)	
LE V: Effective date, if other than the fective date is listed, the date must of filing.) If the date inserted in this block does	e date of filing: 3-8-2021 (OPTIONAL) be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be liment of State's records.
LE V: Effective date, if other than the fective date is listed, the date must of filing.) If the date inserted in this block does ument's effective date on the Depart LE VI: Other provisions, if any.	be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be liment of State's records.
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LE V: Effective date, if other than the fective date is listed, the date must of filing.) If the date inserted in this block does ument's effective date on the Depart LE VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of This document is a lam aware that an	be specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be liment of State's records.

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)